

## "FEE ADDRESS" INDICATION FORM

**Address to:**  
Mail Stop M Correspondence  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Fax to:**  
571-273-6500

- OR -

**INSTRUCTIONS:** The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. **When to check the first box below:** If you have a Customer Number to represent the fee address. **When to check the second box below:** If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.

For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:

☒ Customer Number: 000197

**OR**

☐ The attached Request for Customer Number (PTO/SB/125) form.

PATENT NUMBER (if known)	APPLICATION NUMBER
7905308; 7887965; 7837249; 7906241; 7867661; 7897286; 7892686; 7892688; 7892682;	11/431212; 12/668226; 11/248449;

Completed by (check one):

<input type="checkbox"/> Applicant/Inventor	<div style="border-bottom: 1px solid black; text-align: center;">/Anthony A. Laurentano/ Signature</div>
<input checked="" type="checkbox"/> Attorney or Agent of record	<div style="border-bottom: 1px solid black; text-align: center;">Anthony A. Laurentano Typed or printed name</div>
<input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	<div style="border-bottom: 1px solid black; text-align: center;">(617) 202-4624 Requester's telephone number</div>
<input type="checkbox"/> Assignee recorded at Reel _____ Frame _____	<div style="border-bottom: 1px solid black; text-align: center;">June 7, 2011 Date</div>

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: June 6, 2011

Electronic Signature for Anthony A. Laurentano: /Anthony A. Laurentano/